

**COUNTY OF SAN DIEGO
VOLUNTEER REPORT FORM
PERIOD JULY 1, 1998 - JUNE 30, 1999**

COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS

1999 JUL -1 PM 3:24

THOMAS J. MONTAGNA
CLERK OF THE BOARD
OF SUPERVISORS

1. DEPARTMENT/COURT INFORMATION:

Department/Court: HHSA / South Region

Division/Unit: South Bay Public Health Center #518

2. VOLUNTEER PROGRAM BENEFITS:

- a. GENERAL VOLUNTEER (this section should include community volunteer, student intern, groups, corporations, etc.)

No. Vol.	<u>10</u>	Hours	<u>512.5</u>	x	\$14.30	=	<u>7328.75</u>
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Types of work performed by GENERAL VOLUNTEERS in this category: _____

Clerical Support

- b. INSTITUTIONAL VOLUNTEER (this section should include court referrals, honor camp inmates, PIC/RETC, GAIN, etc.)

No. Vol.	<u>9</u>	Hours	<u>1112.5</u>	x	\$14.30	=	<u>15908.75</u>
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Types of work performed by INSTITUTIONAL VOLUNTEERS in this category: _____

Clerical Support

- c. SPECIALIZED VOLUNTEERS (this section should include utilization of Special Volunteers in positions requiring specific skills and/or expertise levels, for example, an attorney, physician, sports figure or celebrity. These specialized positions have verifiable compensation levels (VCL). If you have such a volunteer, please indicate the position, hours and compensation level below.

<u>Position</u>	<u>Hours</u>	x	<u>VCL</u>	=	<u>Dollar Benefit</u>
<u>MS</u>	<u>81</u>	x	<u>35.00/hr</u>	=	<u>\$ 2835.00</u>

No. Vol	<u>1</u>	Total Hours	<u>81</u>	Total Value	<u>\$ 2835.00</u>
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Types of work performed by SPECIALIZED VOLUNTEERS in this category: _____

volunteer MS in the week. chris oliver

d. TOTALS OF DEPARTMENT VOLUNTEERS (from above):

	<u>No. of Volunteers</u>	<u>Hours</u>	<u>Dollar Benefit</u>
2a:	<u>10</u>	<u>512.5</u>	\$ <u>7328.75</u>
2b:	<u>9</u>	<u>1112.5</u>	\$ <u>15908.75</u>
2c:	<u>1</u>	<u>81</u>	\$ <u>2835.00</u>
TOTALS: <u>20</u> <u>1706.</u> \$ <u>26072.5</u>			

3. DONATIONS TO VOLUNTEER PROGRAM:

Please list all donations to the department's Volunteer Program including monetary donations and tangible/intangible items. Items such as computers, air time, transportation, books, etc. Please assign a fair market value to each and add to the total value of the donations section.

<u>Item Donated</u>	<u>Value</u>	<u>Item Donated</u>	<u>Value</u>
<u>Food Gift Certificates</u>	<u>\$ 100.00</u>		\$ <u> </u>
	\$ <u> </u>		\$ <u> </u>
TOTAL VALUE \$ <u>100.00</u>			

4. VOLUNTEER PROGRAM COSTS:

- a. Cost of direct supervision of volunteers (total hours of direct supervision times hourly rate of staff person(s) directly supervising program volunteers. *Sr. Clerk*

Hours 10 x Rate \$ 10.97 = \$ 109.70

- b. Cost of program coordination (total hours of program coordination times hourly rate of coordinator(s). This section should include coordination of staff, compiling statistics, job description preparation, volunteer placements and recognition, etc.

Hours 5 x Rate \$ 10.97 = \$ 54.85

- c. Other program costs (volunteer training materials/supplies, recognition costs, etc.):

Item	Cost
Birthday cards / cakes	30.00

TOTAL OF OTHER PROGRAM COSTS

=

\$ 30.00

- d. TOTAL OF VOLUNTEER PROGRAM COST =
(add 4a, 4b, and 4c)

\$ 194.55

5. NET BENEFIT TO DEPARTMENT FROM VOLUNTEER PROGRAM:

- a. Total Dollar Benefits of Volunteers, Item 2d (Page 2) \$ 26072.5
- b. Total of Donations to Volunteer Program, Item 3 (Page 2) \$ 100.00
- ADD a + b \$ 26172.5
- c. Subtract Total of Volunteer Program Costs, Item 4d (Page 3) (\$ 194.55)
- TOTAL PROGRAM BENEFIT \$ 25977.95

6. **RECRUITING:**

Please describe your recruiting programs:

Maximus Cal Works, United Way, Southwestern Jr. College
Learning Center, and - 9 - month, RSVP

7. **SPECIAL VOLUNTEER PROGRAM ACTIVITIES/ACHIEVEMENTS:**

Please describe any special activities and/or achievements your program was involved in during the period of this report:

Total volunteer hours and program benefits
during this period is phenomenal.

8. **VOLUNTEER PROGRAM GOALS FOR FISCAL YEAR 1999-00:**

Please describe your program goals. Include activities, number of volunteers, recruitment, training, recognition and other goals:

Continue to collaborate with Maximus for
work force volunteers to obtain on-the-job training
Continue efforts to attract more volunteers

9. **GENERAL INFORMATION:**

Name of Person Completing Report: Emma Abtair, PTH Manager

Phone Number: 691-4535 Mail Stop S518 E-Mail FAX 691-4611

Volunteer Coordinator: Leticia Obispo, Senior Clerk

Phone Number: 691-4525 Mail Stop S518 E-Mail FAX 691-4611

10. **DEPARTMENT CERTIFICATION:**

Betty Ann Howell
DEPARTMENT HEAD SIGNATURE

6-30-99
DATE